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<b>TRANSMITTAL FORM</b>  <small>(to be used for all correspondence after initial filing)</small>	Application Number	10/044,119-Conf. #8122	
	Filing Date	January 11, 2002	
	First Named Inventor	Timothy R. Fitch	
	Art Unit	2133	
	Examiner Name	F. Alphonse	
Total Number of Pages in This Submission	7	Attorney Docket Number	283_346.02

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form  <input type="checkbox"/> Fee Attached  <input type="checkbox"/> Amendment/Reply  <input type="checkbox"/> After Final  <input type="checkbox"/> Affidavits/declaration(s)  <input type="checkbox"/> Extension of Time Request  <input type="checkbox"/> Express Abandonment Request  <input checked="" type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Reply to Missing Parts/Incomplete Application  <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s)  <input type="checkbox"/> Licensing-related Papers  <input type="checkbox"/> Petition  <input type="checkbox"/> Petition to Convert to a Provisional Application  <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address  <input type="checkbox"/> Terminal Disclaimer  <input type="checkbox"/> Request for Refund  <input type="checkbox"/> CD, Number of CD(s) _____  <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC  <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences  <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)  <input type="checkbox"/> Proprietary Information  <input type="checkbox"/> Status Letter  <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): PTOSB/08/A (1 pg.), Return Mailroom Postcard, Certificate of Express Mailing
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	WALL MARJAMA & BILINSKI LLP		
Signature	<i>George S. Blasiak</i>		
Printed name	George S. Blasiak		
Date	February 5, 2007	Reg. No.	37,283

Transmittal	
I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the U.S. Postal Service as Express Mail, No. EV954203275US, on the date shown below in an envelope addressed to: MS Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.	
Dated: February 5, 2007	Signature: <i>[Signature]</i> (Susan Pagano)



Approved for use through 01/31/2007. OMB 0651-0032  
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Effective on 12/08/2004.  
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

## FEE TRANSMITTAL For FY 2006

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 180.00

### Complete if Known

Application Number	10/044,119-Conf. #8122
Filing Date	January 11, 2002
First Named Inventor	Timothy R. Fitch
Examiner Name	F. Alphonse
Art Unit	2133
Attorney Docket No.	283_346.02

### METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): \_\_\_\_\_  
☒ Deposit Account Deposit Account Number: 50-0289 Deposit Account Name: Wall Marjama & Bilinski LLP  
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)  
☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee  
☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

### FEE CALCULATION

#### 1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

#### 2. EXCESS CLAIM FEES

Fee Description	Small Entity Fee (\$)	Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	Fee (\$)	Fee Paid (\$)
HP = highest number of total claims paid for, if greater than 20.						

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
HP = highest number of independent claims paid for, if greater than 3.			

#### 3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
		(round up to a whole number) x		

#### 4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): 1806 Submission of an Information Disclosure Statement 180.00

#### SUBMITTED BY

Signature	<i>George S. Blasiak</i>	Registration No. (Attorney/Agent)	37,283	Telephone	(315) 425-9000
Name (Print/Type)	George S. Blasiak	Date	February 5, 2007		

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Signature: *[Signature]* (Susan Pagano)



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Dated: February 5, 2007

Signature: \_\_\_\_\_

(Susan Pagano)

Docket No.: 283\_346.02  
(PATENT)

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re Patent Application of:  
Timothy R. Fitch et al.

Application No.: 10/044,119

Confirmation No.: 8122

Filed: January 11, 2002

Art Unit: 2133

For: **ERGONOMICALLY DESIGNED  
MULTIFUNCTIONAL TRANSACTION  
TERMINAL**

Examiner: F. Alphonse

**INFORMATION DISCLOSURE STATEMENT (IDS)**

MS Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

The references cited on attached form PTO/SB/08A are being called to the attention of the Examiner.

It is respectfully requested that the cited references be expressly considered during the prosecution of this application, and the references be made of record therein and appear among the "references cited" on any patent to issue therefrom.

As provided for by 37 CFR §1.97(h), no inference should be made that the information and references cited are material to patentability. Also, no inference should be made that a reference is prior art merely because it is included in this statement. Under 37 CFR §1.97(g), the submission of an information disclosure statement should not be considered as representation that a search has been made.

02/07/2007 WASFAW1 00000032 500289 10044119

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Applicants believe that a fee is required for submission of this statement. The Commissioner is hereby authorized to charge the fees associated with this communication and any additional fees or credit any overpayment to Deposit Account No. 50-0289.

Dated: February 5, 2007

Respectfully submitted,

Customer No. 20874

GSB/slp

By   
George S. Blasiak  
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250 South Clinton Street  
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(315) 425-9000  
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ALL REFERENCES CONSIDERED EXCEPT WHERE LINED THROUGH. /F.A./



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Substitute for form 1449/PTO		<b>Complete if Known</b>	
<b>INFORMATION DISCLOSURE STATEMENT BY APPLICANT</b>  (Use as many sheets as necessary)		Application Number	10/044,119-Conf. #8122
		Filing Date	January 11, 2002
		First Named Inventor	Timothy R. Fitch
		Art Unit	2133
		Examiner Name	F. Alphonse
Attorney Docket Number	283_346.02		
Sheet	1	of	1

U.S. PATENT DOCUMENTS					
Examiner Initials*	Cite No. <sup>1</sup>	Document Number Number-Kind Code <sup>2</sup> (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
F.A.	AA*	US-5,151,581	09-29-1992	Krichever et al.	
F.A.	AB*	US-6,196,460 B1	03-06-2001	Shin	
F.A.	AC*	US-6,275,644 B1	08-14-2001	Domas, et al.	
F.A.	AD*	US-6,676,016 B1	01-13-2004	Coskrey, IV	
F.A.	AE*	US-6,679,425 B1	01-20-2004	Sheppard et al.	

FOREIGN PATENT DOCUMENTS						
Examiner Initials*	Cite No. <sup>1</sup>	Foreign Patent Document	Publication Date	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T <sup>3</sup>
		Country Code*-Number*Kind Code* (if known)	MM-DD-YYYY			

\*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. \*CITE NO.: Those application(s) which are marked with an asterisk (\*) next to the Cite No. are not supplied (under 37 CFR 1.98(a)(2)(ii)) because that application was filed after June 30, 2003 or is available in the IPW. <sup>1</sup> Applicant's unique citation designation number (optional). <sup>2</sup> See Kind Codes of USPTO Patent Documents at [www.uspto.gov](http://www.uspto.gov) or MPEP 901.04. <sup>3</sup> Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). \* For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. \* Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST.15 if possible. \* Applicant is to place a check mark here if English language Translation is attached.

NON PATENT LITERATURE DOCUMENTS					
Examiner Initials	Cite No. <sup>1</sup>	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.			T <sup>1</sup>

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<sup>1</sup> Applicant's unique citation designation number (optional). <sup>2</sup> Applicant is to place a check mark here if English language Translation is attached.

Examiner Signature	/Fritz Alphonse/	Date Considered	05/29/2007
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Application No. (if known): 10/044,119

Attorney Docket No.: 283\_346.02

## Certificate of Express Mailing Under 37 CFR 1.10

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Date

  
Signature

Susan Pagano

Typed or printed name of person signing Certificate

Registration Number, if applicable

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Telephone Number

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IDS (Citation) by Applicant (5 References) (1 page)